


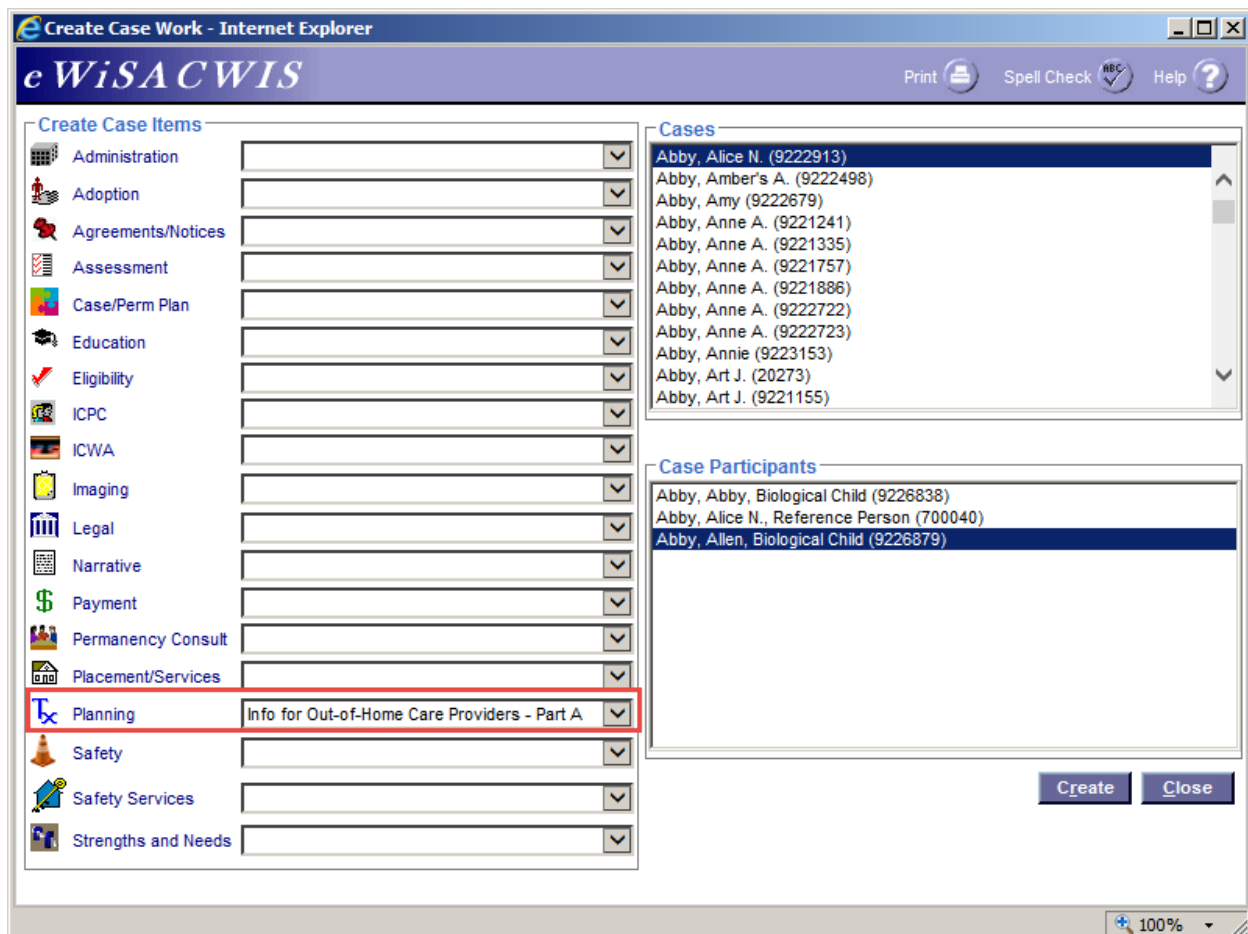
Info to Out-of-Home Care Providers – Part A & Part B

The Info to Out-of-Home Care Providers provides a way for workers to document the information needed for the templates that are required to be sent to all out-of-home care providers.

Creating Part A

1. From the desktop, go to Create > Case Work or click the Case Work button.  This will open the Create Case Work page.
2. On the Create Case Work page, select Info for Out-of-Home Care Providers – Part A from the Planning drop-down. Click the appropriate Case and the Case Participant. Click Create.

Note: Only one page is created per child. If the child changes placement, the worker should update the page to reflect any additional/updated information. Part A can be created independently from Part B.



Create Case Work - Internet Explorer

eWiSACWIS

Print Spell Check Help

Create Case Items

- Administration
- Adoption
- Agreements/Notices
- Assessment
- Case/Perm Plan
- Education
- Eligibility
- ICPC
- ICWA
- Imaging
- Legal
- Narrative
- Payment
- Permanency Consult
- Placement/Services
- Planning** (Info for Out-of-Home Care Providers - Part A)
- Safety
- Safety Services
- Strengths and Needs

Cases

- Abby, Alice N. (9222913)
- Abby, Amber's A. (9222498)
- Abby, Amy (9222679)
- Abby, Anne A. (9221241)
- Abby, Anne A. (9221335)
- Abby, Anne A. (9221757)
- Abby, Anne A. (9221886)
- Abby, Anne A. (9222722)
- Abby, Anne A. (9222723)
- Abby, Annie (9223153)
- Abby, Art J. (20273)
- Abby, Art J. (9221155)

Case Participants

- Abby, Abby, Biological Child (9226838)
- Abby, Alice N., Reference Person (700040)
- Abby, Allen, Biological Child (9226879)

Create Close

100%

3. Creating the 'Information for Out-of-Home Care Providers – Part A' opens a new page as shown below.
4. Information on each tab is either user-entered or prefilled. Prefilled fields that are disabled (not editable) pull from Person Management for the child. Prefilled fields that are enabled (editable) pull from the most recent pending or completed Family Interaction Plan. To update any information in fields that are disabled (e.g. Physical Description), the worker will need to access and update it via Person Management. Information in fields that are enabled can be edited directly on the online page.
 - a. To access the child's Person Management page, click the Child Name hyperlink in the Basic groupbox at the top of the page or click the 'Modify' hyperlink in the groupbox where the identified change is needed.

Information for Out-of-Home Care Providers - Part A - Internet Explorer

eWiSACWIS TM Print Spell Check Help

Basic

Child Name: [Abby, Allie \(9226879\)](#) Date Form Filled Out: 02/14/2017 Updated By:

Case Name: [Abby, Alice N., IV \(9222913\)](#) ☐ Check for required fields Date Placed in Care: 05/05/2014

General All About Me Contacts Medical Info Additional Info Prudent Parenting

Child Information

Birth Date: 01/01/2000 Nickname(s): [Modify](#)

Primary Language: English Secondary Language: Third Language:

Tribal Affiliation: Spiritual or Religious Affiliation: Preferred Place of Worship:

Physical Description:

The child was previously under a guardianship. No The child was previously adopted. No

Provider Name(s): Paul Provider [Search](#) [Remove](#)

Parent/Guardian Information

Name - Parent: [Abby, Alice N., IV](#) Relationship to Child: Mother

Address: 120 W. Wisconsin Ave. Phone - Home/Cell: H:(414)123-1231

Milwaukee, WI 53203 Phone - Work: (321)654-9878 Ext. 1111

Is this person the child's legal guardian? No

☒ Yes ☐ No Is contact with parent/guardian supervised? If yes, who is responsible for supervision?

[More...](#) [Less...](#) [Default](#)

Options: Go [Save](#) [Close](#)

5. To update the 'Physical Description' go to the Additional tab on Person Management.

Note: The Height, Weight, Eye Color and Hair Color fields on the Additional tab will also prefill as static text in the 'Physical Description' box on the General tab on Part A.

The screenshot displays the eWiSACWIS system interface. The top navigation bar includes tabs: General, All About Me, Contacts, Medical Info, Additional Info, and Prudent Parenting. The 'Additional Info' tab is selected, showing fields for Child Information (Birth Date, Nickname(s), Primary Language, Secondary Language, Third Language, Tribal Affiliation, Spiritual or Religious Affiliation, Preferred Place of Worship) and a Physical Description field. The Physical Description field contains the text: 'Height: 5 feet 7 inches ; Weight: 120; Eye Color: Blue; Hair Color: Brown; Physical Description...'. A blue arrow points from this field to the Physical Description field in the General tab. The General tab shows the same Child Information fields and a Physical Description field. The Physical Description field in the General tab contains the text: 'Height: 5 feet 7 inches ; Weight: 120; Eye Color: Blue; Hair Color: Brown; Physical Description...'. The 'Physical Description' field in the General tab is highlighted in yellow.

6. The entire 'All About Me' tab is optional and user-entered. The information to complete this tab should be obtained from the child/youth.

The screenshot shows a web browser window titled "Information for Out-of-Home Care Providers - Part A - Internet Explorer". The application is "eWiSACWIS". The "Basic" section contains fields for "Child Name" (Abby, Allie (9226879)), "Date Form Filled Out" (02/14/2017), "Updated By", "Case Name" (Abby, Alice N., IV (9222913)), a checkbox for "Check for required fields", and "Date Placed in Care" (05/05/2014). Below this is a tabbed interface with "General", "All About Me", "Contacts", "Medical Info", "Additional Info", and "Prudent Parenting". The "All About Me" tab is active, showing a yellow warning: "Information entered on this tab is optional and should be gathered from the child or youth." The "All About Me" section includes text prompts and input fields for: "In my free time I like to (i.e. play sports, hang out with friends, visit family, play games, go outside, etc.):", "My best friends are:", "Some of my favorite foods and meals are:", "Some foods and meals I really dislike are:", "Some of my favorite books, stories, and movies are:", and "I am closest to the following family members:". At the bottom, there is an "Options:" dropdown menu and a "Go" button.

7. The information on the 'Contacts' tab is obtained from both Person Management and the most recent Family Interaction Plan (pending or completed).

General All About Me **Contacts** Medical Info Additional Info Prudent Parenting

Agency Contacts

Worker: Cake, Caitlin M. [Search](#) Phone: (123)456-7890 Ext: 1234 After Hours: Ext:
Agency: Milwaukee-Admin Phone:
Supervisor: Cake, Caitlin M. [Search](#) Phone: (123)456-7890
Tribal Worker: [Search](#) Phone:

Emergency Contact Person(s)

Name	Relationship	Telephone	
			Modify

Persons Allowed to have Contact with Child

Name	Relationship	
		Insert

Prohibited or Restricted Contacts and Visitors

Insert

Child's Siblings

Name: [Search](#) Birth date: Telephone: [Delete](#)

Lives: If 'Other', specify:

Sibling Interaction Plan: How, when and at what frequency sibling interactions will occur. Is the out-of-home care provider responsible to facilitate this interaction?

Description...

[More...](#) [Less...](#) [Default](#)

[Insert](#)

Options: [Go](#) [Save](#) [Close](#)

8. The Modify links on the 'Medical Info' tab bring the worker to the 'Medical/Mental Health' tab of Person Management, as this is where the majority of the information on this page is prefilled from.

General	All About Me	Contacts	Medical Info	Additional Info	Prudent Parenting
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Primary Medical Providers
Name - Physician / Clinic: Modify
Address:
Telephone:
Date of last exam:
Name - Dentist / Dental Clinic:
Address:
Telephone:
Date of last exam:
Name - Mental Health Provider:
Address:
Telephone:
Date of last exam:
☐ Yes ☐ No ☐ N/A Is the out-of-home care provider expected to participate in therapy with the child?

Other Physical or Mental Health Specialists or Clinics

Name	Specialty	Telephone	Ext
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Preferred Hospital / Clinic
Note: Use of a hospital may be dictated by insurance company/plan.
Name: Address: Telephone:

Health Insurance Coverage
☐ Yes ☐ No Has the out-of-home care provider been given the child's MA card (regular or temporary)?
Describe how and when it will be provided. Modify

Other Health Insurance Provider	Telephone	Policy Number	Group Number
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Options: Go Save Close

9. The 'Additional Info' tab mostly prefills from the child's education history on Person Management. The Modify link brings the worker to the 'Education' tab of Person Management.

General All About Me Contacts Medical Info **Additional Info** Prudent Parenting

School/Child Care Information [Modify](#)

School/Child Care Currently Attending or Most Recently Attended

Name: Menomonee Falls High Telephone: (262)255-8444

Address: W142N8101 Merrimac Dr - Menomonee Falls, WI 53051-3999

Grade Level: 10th

School Contact: Corey Golla Contact Information: (262)255-8444

The school district has been notified of the child's placement (if age two or older). No

The child is less than age five and attends child care that is not early education, pre-school, or 4K. No

The child is less than age five and does not attend early education or day care. No

The child is in an early intervention program. No

The child is in pre-school. No

The child is in kindergarten. No

The child is in regular education. Yes

The child is in special education. Yes

(2) Less than 50% of day

The child has an individualized education plan (IEP). Yes

Options:

Some fields on this tab are prefilled with the information on the primary 'Maintain Education History' page for the child. This is access by clicking on the 'School History' edit hyperlink on the person management page > education tab.

10. All fields on the ‘Prudent Parenting’ tab are user-entered and required.

eWISACWIS TM Print Spell Check Help

Basic

Child Name: [Abby, Allie \(9226879\)](#) Date Form Filled Out: Updated By: Cake, Caitlin M., III 02/14/2017

Case Name: [Abby, Alice N., IV \(9222913\)](#) ☐ Check for required fields Date Placed in Care:

General **All About Me** **Contacts** **Medical Info** **Additional Info** **Prudent Parenting**

The following information is required to meet Reasonable and Prudent Parent standards.

Cultural, Religious, and Tribal Considerations

For this child, take into account the following cultural, religious, and tribal considerations when making prudent parenting decisions: [Details](#)

Description...

[More...](#) [Less...](#) [Default](#)

Recreational Activities

This child engages in or would like to participate in the following recreational activities, sports, and/or extra-curricular activities (e.g. birthday parties, movies, volunteering, dances, etc.):

Description...

[More...](#) [Less...](#) [Default](#)

For this child, consider the restrictiveness of the placement and whether he/she has the necessary training and safety equipment to safely participate in the activity under consideration.

Description...

[More...](#) [Less...](#) [Default](#)


11. Once all of the tabs on Part A have been completed, check the ‘Check for required fields’ checkbox and click on the Save button. If all fields have been properly completed, the checkbox will remain checked. If not, an error message will display and the checkmark will be cleared from the field.

12. All information contained on Part A prefills into the template that is located in the ‘Options’ dropdown at the bottom of the page. To open and/or print the template, select “Info for OHC Providers – Part A” from the dropdown and click on the Go button.

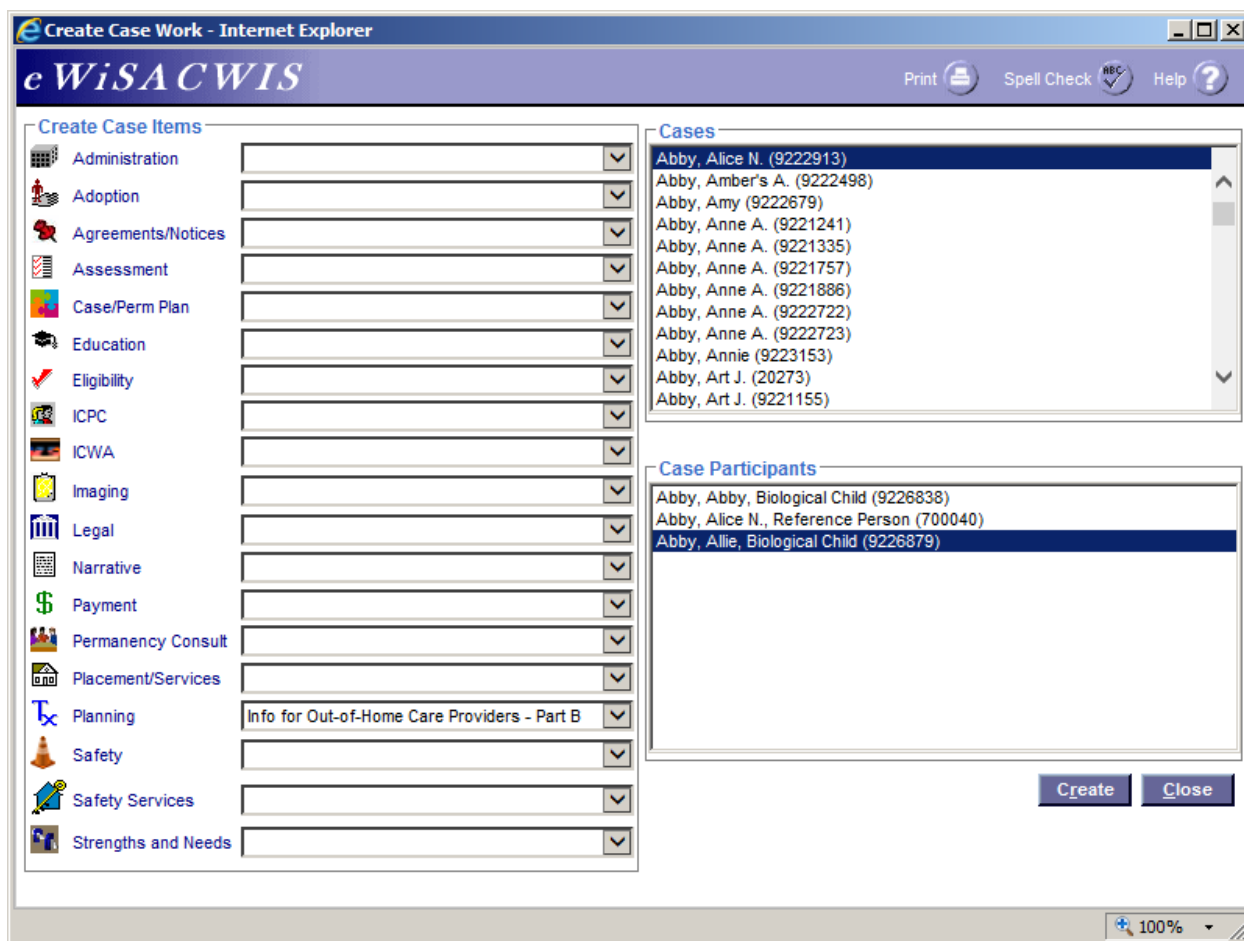
Options: [Go](#)

[Info for OHC Providers - Part A](#)

Creating Part B

1. From the desktop, go to Create > Case Work or click the Case Work button.  This will open the Create Case Work page.
2. On the Create Case Work page, select Info for Out-of-Home Care Providers – Part B from the Planning drop-down. Click the appropriate Case and the Case Participant. Click Create.

Note: Only one page is created per child. If the child changes placement, the worker should update the page to reflect any additional/updated information. Part B can be created independently from Part A.



The screenshot shows the 'Create Case Work - Internet Explorer' window for the 'eWiSACWIS' system. The interface includes a top navigation bar with 'Print', 'Spell Check', and 'Help' options. On the left, a 'Create Case Items' sidebar lists various categories with corresponding icons and dropdown menus. The 'Planning' dropdown is currently selected, showing 'Info for Out-of-Home Care Providers - Part B'. On the right, there are two main sections: 'Cases' and 'Case Participants'. The 'Cases' section contains a list of names and IDs, with 'Abby, Alice N. (9222913)' highlighted. The 'Case Participants' section contains a list of names and IDs, with 'Abby, Allie, Biological Child (9226879)' highlighted. At the bottom right, there are 'Create' and 'Close' buttons. The status bar at the bottom indicates a zoom level of 100%.

Create Case Items	Cases	Case Participants
Administration	Abby, Alice N. (9222913)	Abby, Abby, Biological Child (9226838)
Adoption	Abby, Amber's A. (9222498)	Abby, Alice N., Reference Person (700040)
Agreements/Notices	Abby, Amy (9222679)	Abby, Allie, Biological Child (9226879)
Assessment	Abby, Anne A. (9221241)	
Case/Perm Plan	Abby, Anne A. (9221335)	
Education	Abby, Anne A. (9221757)	
Eligibility	Abby, Anne A. (9221886)	
ICPC	Abby, Anne A. (9222722)	
ICWA	Abby, Anne A. (9222723)	
Imaging	Abby, Annie (9223153)	
Legal	Abby, Art J. (20273)	
Narrative	Abby, Art J. (9221155)	
Payment		
Permanency Consult		
Placement/Services		
Planning		
Safety		
Safety Services		
Strengths and Needs		

3. Creating the 'Information for Out-of-Home Care Providers – Part B' opens a new page as shown below.
4. Information on each tab is either user-entered or prefilled. Prefilled fields that are disabled (not editable) pull from Person Management for the child. Prefilled fields that are enabled (editable) pull from the most recent qualifying CANS (*approved within the last 12 months*). To update any information in fields that are disabled (e.g. Physical Description), the worker will need to access and update it via Person Management. Information in fields that are enabled can be edited directly on the online page.
 - To access the child's Person Management page, click the Child Name hyperlink in the Basic groupbox at the top of the page or click the 'Modify' hyperlink in the groupbox where the identified change is needed.

Information for Out-of-Home Care Providers - Part B - Internet Explorer

eWiSACWIS TM Print Spell Check ABC Help ?

Basic

Child Name: [Abby, Allie \(9226879\)](#) Date Form Filled Out: 02/14/2017 Updated By:

Case Name: [Abby, Alice N. \(9222913\)](#)

General Trauma School/Child Care Life Functioning Acculturation Emotional/Behavioral Provider Summary

Child Information

Birth Date: 01/01/2000 Gender: Female SSN: [Modify](#)

Race: Ethnicity:

Provider Name(s): Paul Provider [Search](#) [Remove](#)

Placement Reason(s)

☐ Child abuse or neglect (CAN) ☒ Behavioral needs ☐ Illness of primary caregiver

☐ Physical abuse ☐ Child's disability ☐ Incarceration of primary caregiver

☐ Sexual abuse ☐ Delinquent act(s) ☐ Relinquishment

☐ Emotional abuse ☐ Assaultive ☐ Substance use

☐ Neglect ☐ Non-assaultive

☐ Abandonment ☐ Death of primary caregiver

☒ Yes ☐ No CHIPS, other than CAN? Type of CHIPS/JIPS/Delinquency:

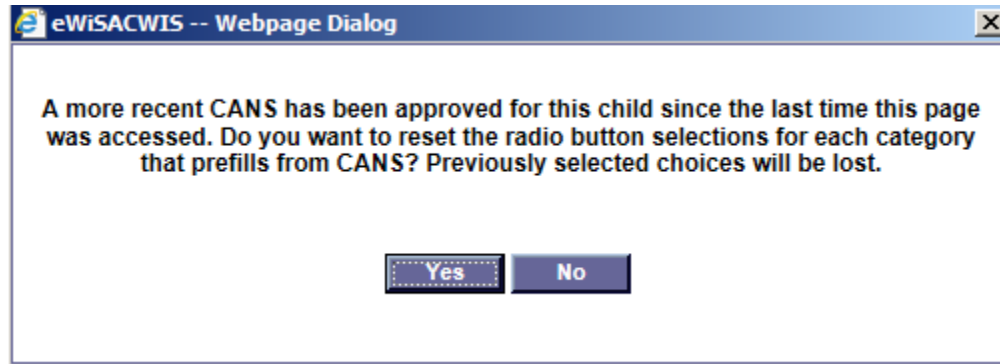
Nature of Offense(s): ☐ Property ☐ Assaultive

Placement is: ☐ Voluntary ☐ Court ordered

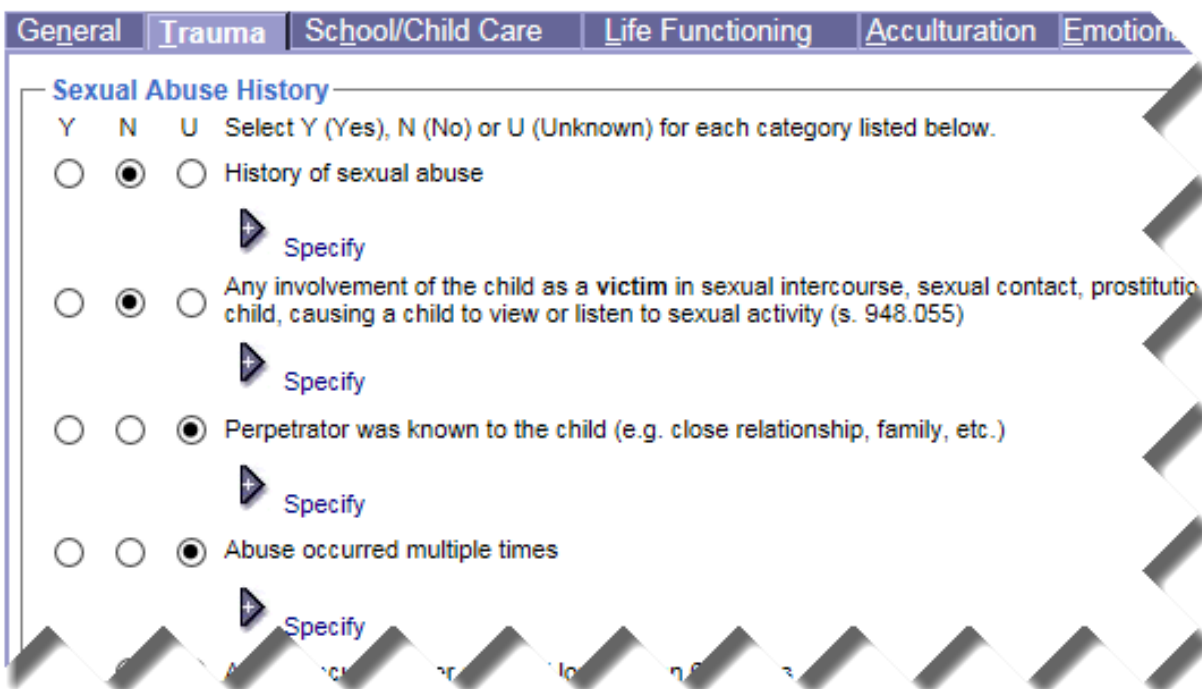
Options:

100%

5. If a more recent CANS has been approved after creating and saving Part B, a message will display asking if the new information should update onto Part B. If the user selects Yes, the radio button selections that prefill from the CANS will be updated; however, the narratives will not.



6. All fields on the 'Trauma' and 'School/Child Care' tabs are prefilled from the CANS and are user-editable.



General Trauma **School/Child Care** Life Functioning Acculturation En

Educational Needs

Y N U Select Y (Yes), N (No) or U (Unknown) for each category listed below.

☐ ☐ ☒ Difficulty getting along with teachers
☐ Specify

☐ ☐ ☒ Difficulty getting along with peers
☐ Specify

☐ ☐ ☒ Extra time spent with child on required school activities (e.g. homework)
☐ Specify

☐ ☐ ☒ Attendance/Tuancy issues, unrelated to school suspensions
☐ Specify

7. Fields on the 'Life Functioning' tab are prefilled from either the CANS or Person Management. The 'Modify' links bring the worker to the appropriate tab of Person Management to update the information as needed.

General Trauma School/Child Care **Life Functioning** Acculturation En

Developmental

Y N U Select Y (Yes), N (No) or U (Unknown) for each category listed below.

☐ ☐ ☒ Significant delays in cognitive functioning
☐ Specify

☐ ☐ ☒ Reliant on caregiver to function
☐ Specify

☐ ☐ ☒ Unable to indicate wants and/or needs
☐ Specify

☐ ☐ ☒ Difficulty understanding simple routines or simple tasks
☐ Specify

☐ ☐ ☒ Meets diagnostic criteria for autism order
☐ Specify

8. All fields on the 'Acculturation' tab are prefilled from the CANS and are user-editable.

The screenshot shows a software window with a tabbed interface. The tabs are 'General', 'Trauma', 'School/Child Care', 'Life Functioning', 'Acculturation', and 'Emotional/Behavioral'. The 'Acculturation' tab is selected. Below the tabs, there is a section titled 'Acculturation' with a sub-header 'Y N U Select Y (Yes), N (No) or U (Unknown) for each category listed below.' There are five categories, each with three radio buttons (Y, N, U) and a 'Specify' link. The categories are: 'English as a second language / needs a translator', 'Struggles with cultural identity', 'Needs assistance with creating connections to others who share his / her cultural identity', 'Needs support to practice cultural rituals', and 'Other'. In each category, the 'U' radio button is selected.

9. Fields on the 'Emotional/Behavioral' tab are prefilled from either the CANS or Person Management. The 'Modify' links bring the worker to the appropriate tab of Person Management to update the information as needed.

The screenshot shows a software window with a tabbed interface. The tabs are 'General', 'Trauma', 'School/Child Care', 'Life Functioning', 'Acculturation', and 'Emotional/Behavioral'. The 'Emotional/Behavioral' tab is selected. Below the tabs, there is a section titled 'Mental Health Needs' with a sub-header 'Y N U Select Y (Yes), N (No) or U (Unknown) for each category listed below.' There are six categories, each with three radio buttons (Y, N, U) and a 'Specify' link. The categories are: 'History of mental health needs or diagnosis in family', 'Suicidal risk', 'Self-injurious (e.g. intentionally harms self)', 'Other self-harm (e.g. reckless, risk-taking behavior)', 'Lethargic, apathetic, withdrawn, unresponsive', and 'Psychosis'. In each category, the 'U' radio button is selected.

10. All fields on the ‘Provider Summary’ tab are user-entered.

General | **Trauma** | **School/Child Care** | **Life Functioning** | **Acculturation** | **Emotional/Behavioral** | **Provider Summary**

Out-of-Home Care Provider Qualifications or Needs

Y N U Select Y (Yes), N (No) or U (Unknown) for each category listed below.

☐ ☐ ☒ Frequent and long distance transportation
 ▶ Specify

☐ ☐ ☒ Frequent family interaction visits
 ▶ Specify

☐ ☐ ☒ Transportation to school of origin
 ▶ Specify

☐ ☐ ☒ Involvement in medical or therapy appointments
 ▶ Specify

☐ ☐ ☒ Other
 ▶ Specify

Important Documents

The placing agency has given the out-of-home care provider (s): (Check all that apply.)

<input type="checkbox"/> Birth certificate (copy)	<input type="checkbox"/> Placement agreement
<input type="checkbox"/> Court order	<input type="checkbox"/> School academic records, including IEP
<input type="checkbox"/> Court report	<input type="checkbox"/> Signed medical release for emergency health care
<input type="checkbox"/> Dental records	<input type="checkbox"/> Social history
<input type="checkbox"/> Information on diagnosis	<input type="checkbox"/> Social Security card
<input type="checkbox"/> MA card	<input type="checkbox"/> Summary of mental health treatment
<input type="checkbox"/> Medical records - including immunization record	<input type="checkbox"/> Summary of social/psychiatric evaluations

13. All information contained on Part B prefills into the template that is located in the ‘Options’ dropdown at the bottom of the page. To open and/or print the template, select “Info for OHC Providers – Part B” from the dropdown and click on the Go button.

Options: Info for OHC Providers - Part B ▼ Go

Imaging

If the user wants to document the forms that are printed out and given to the provider, they can upload the documents as images. Two new image types have been created for Part A and B under the “Planning” category.

Imaging Search - Internet Explorer

eWiSACWIS

Print Spell Check Help

Search Criteria

Search by: **Person** Name: Kellogg, Eric (9225060) [Person Search](#) Start Date: 07/21/2015 End Date: 07/20/2016

Category: Medical/Mental Health Participant Document Placement/Services **Planning** Private Case Adoption Safety Subsidized Guardianship

Type: Correspondence Info for OHC Providers - Part A Info for OHC Providers - Part B Other - Planning

Hold down the 'Ctrl' key for multi-selection

Search

Results

Imaging - Internet Explorer

eWiSACWIS

Print Spell Check Help

Case Details

Case: Aardvark, Amy B. (9222873) Worker: Caitlin M. Cake

Image Details

Date of Document: 00/00/0000

Category: Planning

Type: Correspondence

File Name: Info for OHC Providers - Part A Info for OHC Providers - Part B Other - Planning

Comments:

Participants:

- Aardvark, Allie (Bio Child)
- Aardvark, Amy B. (Reference Person)
- Abby, Alisha B. (Inactive)
- Abby, Andrea (Bio Child)
- Abby, Andrew A. (Present Spouse)
- CANS, baby (Bio Child)
- Kellogg, Andy (Other Relative)
- Kellogg, Cale (Other Relative)
- Kellogg, David (Other Relative)

Last Updated By:

Delete

Create Save Close